(THIS IS NOT AN ORDER)				THIS	THIS REQ K IS IS NOT A SMALL BUSINES					SIDE		1	12	
1. REQUEST N				3. REQ	UISITION	N/PURCI	ASE REQUEST NO	D.	4. CERT. FOR NAT. DEF. UNDER BDSA REG. 2			RATING	<u> </u>	
N00173-05-Q-0033 02/18/05					81-5006-05				AND/OR DMS REG. 1					
5a. ISSUED BY									6. DEL	IVER E	SY (Date)			
Supply (	Officer (Code	e 3410)	NRL, Wa	ashin	gton,	DC	20375		7. DEL		page 2			
NAME	50. FC	JR INFORMA	TION CALL (	T COLL			NE NUMBER					OTHE		
AREA CODE NUM										FOR	DESTINATION 9. DESTI		Schedule)	
Monica Y	Y. Osborne				02	1	-1995 a. NAME OF CONSIGNEE					<del> </del>		
			8. TO:						Na	aval	Research	Labora	torv	
a. NAME			b. CC	OMPANY	,						DDRESS			
All Quoters									4555 Overlook Ave SW bldg 49					
c. STREET ADI	DRESS								c. CIT	1				
				T							ngton			
d. CITY				e. STA	TE	f. ZIP	CODE	ľ	d. STATE e. ZIP CODE					
10 PLEASE EL	JRNISH QUOTATIONS	TO THE						[	DC 20375-5329				<del></del>	
ISSUING C	FICE IN BLOCK 5a OI	N OR	IMPORTANT: so indicate or	: This is	a reques	st for infe	ormation, and quota to the address in Blo	ations fur lock 5a.	rnished This re	l are no	ot officers. If you does not commit	are unable to	o quote, please ent to pay any	
BEFORE C	LOSE OF BUSINESS (	Date)   i	costs incurre	d ≀n the i	preparatio	on of th	e submission of this ited by quoter. An	is quotat	ion or	to con	tract for supplies	or service.	Supplies are of	
	02/28/05		Quotation mu	ist be co	mpleted l	by the q	uoter.	, .op.oc			2,0,000,111100110110		ing Hoquest for	
		11.	SCHEDUL	E (Incl	ude app	plicable	e Federal, State	e and l	ocal t	axes	,			
ITEM NO.		SUPPLIE	S/ SERVICES		····		QUANTITY		UNIT C		JNIT PRICE	AMOUNT		
(a)	(a) (b)						(c)		(d)		(e)	(f)		
	See attache	d conti	nuation	shee	ets.									
								l						
									]					
									ļ					
								•	l					
									j					
									İ					
									ĺ					
									ŀ					
,														
a. 10 C					NDAR D	AYS	b. 20 CALENDAR DAYS		c. 30 CALEN		DAR DAYS (%)	d. CALENDAR DAYS		
12. DISCOUNT FOR PROMPT PAYMENT				)			(%)		1		NUMBER	PERCENTAGE		
NOTE: Add	litional provisions	· · · · · · · · · · · · · · · · · · ·			are	а	re not attached							
a. NAME OF O	13. NAME A	ND ADDRESS	S OF QUOTE	R			14. SIGNATURE C SIGN QUOTA		ON AU	THOR	ZED TO	15. DATE O	F QUOTATION	
	DD500								<del></del>					
b. STREET AD	DHESS						a NAME (T			16	. SIGNER	г	EDITO	
c. COUNTY							a. NAME (Type or	print)				b. TELEPHONE AREA CODE		
J. 000H11							:					CILCA CODE		
d. CITY e. STATE				f. ZIP (	CODE		c. TITLE (Type or )	print)				NUMBER		

STANDARD FORM 36 JULY 1966
GENERAL SERVICES ADMINISTRATION
FED. PROC. REG. (41 CFR) 1-16.101

CONTINUATION SHEET

REF. NO. OF DOC. BEING CONT'D

PAGE OF

N00173-05-Q-0033

2 12

## NAME OF OFFEROR CONTRACTOR

All Quoters ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
	Period of Performance 03/01/2005 - 02/28/2006				
0001	Maintenance and support for STR2760 GPS Simulator system. System Serial No. 109.	1	yr		
	If available please include a published price list or a cost breakdown and return the RFQ package to the following fax number (202)404-7016.				
	Any questions concerning this Request for Quotation (RFQ) must be e-mailed to SolQnA@condor.nrl.navy.mil at least (5) days before closing date shown in block 10 on page 1 of the RFQ.				